Disease Surveillance & Risk Report

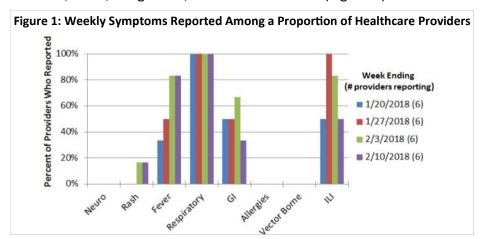
View all reports online at www.healthymadisoncounty.org

Madison County Communicable Disease Activity: Week 6, ending 2/10/18

*Information denoted with an asterisk is subjective and provided on a voluntary basis.

Communicable Diseases Reported to the Health Department: 6 Chlamydia, 1 Gonorrhea, and 2 new chronic Hepatitis C

Primary Care Providers Reported*: Rashes, fever, respiratory illness, gastrointestinal illness (GI), upper respiratory illness (URI), influenza-like illness (ILI), flu, strep throat, sore throats, bronchitis, ear infections, colds, congestion, and sinus infections (Figure 1).





College Health Centers Reported*: Fever, respiratory illness, GI, flu, URI, and strep throat

Syndromic Surveillance in Emergency Department—2/2/18 to 2/22/18: No clusters of illness reported

Medicaid Over-the-Counter (OTC) & Script Medication Alerts—1/20/18 to 1/29/18: Mild/moderate sensitivity for Influenza Agents (Flu antiviral medications)



OMMUNICABLE DISEASES: Madison County

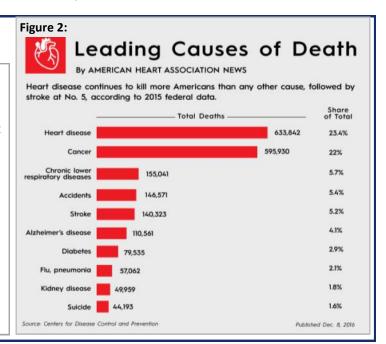
Issue Highlight: **Heart Disease**

Sweating. Pressure. Nausea. Jaw pain.

These are all symptoms of a heart attack, in women. They are symptoms women commonly brush off as the flu, stress or simply feeling under the weather—this could put their lives in jeopardy. For men, the most common heart attack symptom is chest pain or discomfort. Women are more likely to experience the other common symptoms, particularly shortness of breath, nausea/vomiting and back or jaw pain.

Learn more on women and heart disease at—

- CDC https://www.cdc.gov/heartdisease/index.htm
- American Heart Association http://www.heart.org
- National Heart, Lung, and Blood Institute https://www.nhlbi.nih.gov/health-topics/heart-disease-women



Madison County Disease Surveillance & Risk Report

Madison County Flu Activity: Week 6, ending 2/10/18: Widespread

Sporadic Regional No Report No Activity Local Widespread

Weekly Lab-confirmed flu: 72 cases (49 flu Type A and 23 flu Type B) were reported; this is a 1% increase from the previous week (Figure 3).

Figure 3: Positive Flu Laboratory Results Reported to Madison County, by Season

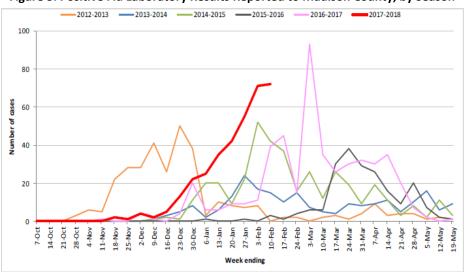
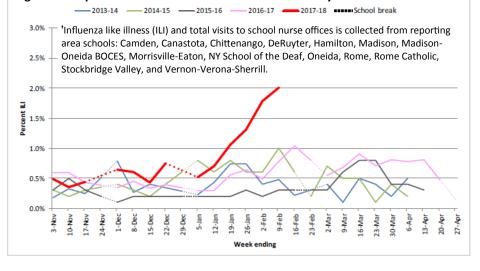


Figure 4: Proportion of ILI-related School Nurses Visits by Season

FLU: Madison County



Schools Districts*: 2.0% of children seen by school nurses had symptoms of influenza-like illness; this is an increase from week 5 (1.8%) (Figure 4).

College Health Centers*: ILI and flu was reported

Primary Care Providers*: ILI and flu was reported

Flu-Associated Pediatric Deaths: No reports this season to date. (Flu-associated deaths only in children younger than 18 years old are nationally notifiable.)

Influenza-like or flu-like illness (ILI) includes: 1) a fever greater than 100°F measured with a thermometer AND (2) a cough AND/OR sore throat in the absence of a known cause other than influenza.

Total Lab Confirmed Flu Reported to Date:

349 (209 Flu Type A-60% & 140 Type B-40%), this is 160% higher than average (134), to date.



Incidence Rate (the number of new flu cases): 98.0 per 100,000 population

Hospitals:

ILI and flu reported



Flu-Related

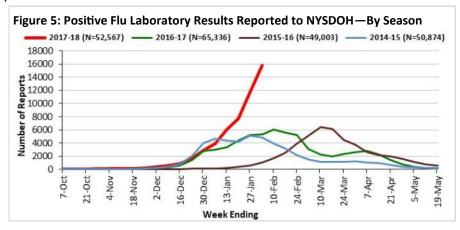
Hospitalizations: Seven hospitalized patient with lab-confirmed flu were reported in Madison County; this is an increase from the previous week (4). A total of 42 hospitalizations have been reported this season to date.

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New York State Flu Activity: Week 5, ending 2/3/18: Widespread

No Report No Activity Sporadic Local Regional Widespread

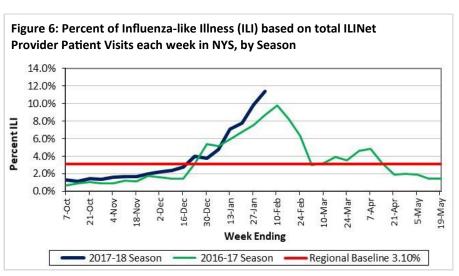
Weekly Lab-Confirmed Flu: 15,753 reports, a 35% *increase* over last week (Figure 5). Flu was reported in all 62 counties.



Incidence (the # of new cases) of lab-confirmed flu is calculated based on lab-confirmed influenza cases per 100,000 population.

Incidence ranged from: 22.10-251.11 cases per 100,000 population.

ILInet Healthcare Providers: 11.43% of weekly patient complaints were flu-like illness (ILI); this an *increase from the previous week* and is *above* the regional baseline of 3.10% (Figure 6). (*ILInet providers* report the total number of patients seen and the total number of those with complaints of influenza-like illness (ILI) weekly in an outpatient setting.)



Hospitalizations: 2,349 reports, a 2% increase over last week.

Flu-Associated Pediatric Deaths: Two reports this week. Three deaths were reported this season to-date.

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Sporadic

National Flu Activity: Week 5, ending 2/3/18: Widespread

No Report No Activity

Flu activity **increased** in the U.S.

Geographic Flu Activity Summary (Figure 7):

(Geographic spread of influenza viruses, not a measure of severity.)

- Widespread influenza activity was reported by Puerto Rico and 48 states
- Regional influenza activity was reported by two states
- Local influenza activity was reported by the District of Columbia and Guam.
- Sporadic activity was reported by the U.S. Virgin Islands.

Flu Activity from ILINet Data (Figure 8):

New York City, the District of Columbia,

Puerto Rico and 43 states experienced high activity; three states experienced moderate ILI activity; two states experienced low ILI activity; and two states experienced minimal ILI activity. (This data is based on the percent of outpatient visits in a state due to ILI compared to the average percent of ILI visits during weeks with little or no influenza virus circulation.)

U.S. ILInet Healthcare Providers:

Outpatient illness visits reported through the Network was 7.7%,

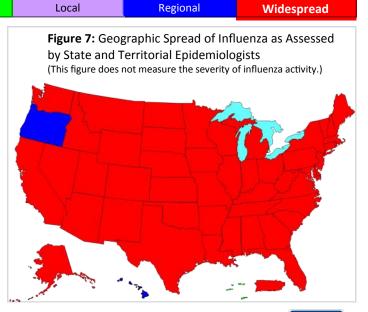
this percentage is *above* the national baseline of 2.2%. All 10 regions in the U.S. reported flu-like illness *at or above* their region-specific baselines.

Flu and Pneumonia-Associated Deaths:

10.1% of all deaths reported through the National Center for Health Statistics mortality surveillance data, occurring during week 3 ending 1/20, were attributed to pneumonia and flu; this is *above* the week 3 epidemic threshold of 7.3%.

Flu-Associated Pediatric Deaths:

10 pediatric deaths were reported during week 5. 63 flu-associated pediatric deaths have been reported this season to date.

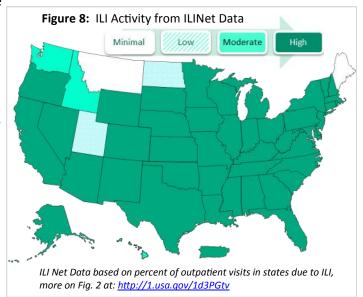


Overall Flu-Related

Hospitalization Rate: 59.9

per 100,000 population.

The highest rate of hospitalization was among adults aged ≥65 years (263.6 per 100,000 population).



Sources: FluView: Weekly U.S. Influenza and Surveillance Report. Centers for Disease Control and Prevention. http://1.usa.gov/1eDDFhh